

0490258

NR

3770

Operation Summer Heat

| OBTS Number | | ARREST / NOTICE TO APPEAR Juvenile Referral Report | | 1. Arrest 2. N.T.A. | | 3. Request for Warrant 4. Request for Capias | | 1 | | Juvenile | | N | | | | | | | | | |
|---|--|--|--|---|--|---|--|---|--|--|--|---|--|---|--|--|--|---|--|------------------------|--|
| Agency ORI Number FLO 500000 | | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | | Agency Report Number (N.T.A.'s only) 06-17110103 | | | | | | | | | | | | | | | | | |
| Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other | | Weapon Seized / Type <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No | | Multiple Clearance Indicator <input type="checkbox"/> 1 | | | | | | | | | | | | | | | | | |
| Location of Arrest (Including Name of Business) S JO6 RD/PURDY LN | | | | Location of Offense (Business Name, Address) | | | | | | | | | | | | | | | | | |
| Date of Arrest 08/02/17 | | Time of Arrest 2049HRS | | Booking Date | | Booking Time | | Jail Date | | Jail Time | | Location of Vehicle TOT TO JOSH BRAND PER REQUEST | | | | | | | | | |
| Name (Last, First, Middle) WHITE, CAROLYN, M. | | | | Alias (Name, DOB, Soc. Sec. #, Etc.) | | | | | | | | | | | | | | | | | |
| Race W - White I - American Indian B - Black O - Oriental/Asian W | | Sex F | | Date of Birth 12/02/1997 | | Height 502 | | Weight 100 | | Eye Color BLUE | | Hair Color BROWN | | Complexion MED | | Build SML | | | | | |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE OBSERVED | | | | Marital Status SINGLE | | Religion NONE | | Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> | | Indication of Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> | | | | | | | | | | | |
| Local Address (Street, Apt. Number) 20502 SAUSALITO DR | | | | (City) BOCA RATON FL 33498 | | (State) | | (Zip) | | Phone (561) 376-7747 | | Residence Type: 1. City 2. County 3. Florida 4. Out of State 2 | | | | | | | | | |
| Permanent Address (Street, Apt. Number) | | | | (City) | | (State) | | (Zip) | | Phone () | | Address Source FLDL | | | | | | | | | |
| Business Address (Name, Street) | | | | (City) | | (State) | | (Zip) | | Phone () | | Occupation WAITRESS | | | | | | | | | |
| D/L Number, State W-300-113-97-942-0 | | | | Soc. Sec. Number [REDACTED] | | | | INS Number | | | | Place of Birth (City, State) MIAMI, FL | | Citizenship USA | | | | | | | |
| Co-Defendant Name (Last, First, Middle) | | | | Race | | Sex | | Date of Birth | | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large | | <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile | | | | | | | | | |
| Co-Defendant Name (Last, First, Middle) | | | | Race | | Sex | | Date of Birth | | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large | | <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile | | | | | | | | | |
| Parent Legal Custodian Other: Name (Last) (First) (Middle) | | | | Residence Phone () | | | | | | | | | | | | | | | | | |
| Address (Street, Apt. Number) | | | | (City) | | (State) | | (Zip) | | Business Phone () | | | | | | | | | | | |
| Notified by: (Name) | | | | Date 08/02/17 | | Time | | Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated | | | | | | | | | | | | | |
| Released To: (Name) | | | | Relationship | | | | Date | | Time | | | | | | | | | | | |
| The above address provided by <input checked="" type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason) | | | | School Attended | | | | Grade | | | | | | | | | | | | | |
| Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | Description of Property | | | | Value of Property | | | | | | | | | | | | | |
| Drug Activity N. N/A P. Possess | | S. Sell B. Buy T. Traffic | | R. Smuggle D. Deliver E. Use | | K. Dispense/ Distribute | | M. Manufacture/ Produce/ Cultivate | | Z. Other | | Drug Type N. N/A A. Amphetamine | | B. Barbiturate C. Cocaine E. Heroin | | H. Hallucinogen M. Marijuana O. Opium/Deriv. | | P. Paraphernalia/ Equipment S. Synthetics | | U. Unknown Z. Other | |
| Charge Description POSSESSION OF HEROIN | | | | Counts 1 | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number 893.13(6)(A) | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity P | | Drug Type E | | Amount / Unit 0.1GRAMS | | Offense # 17110103 | | Warrant / Capias Number | | | | Bond 5.00 | | | | | | | | | |
| Charge Description POSSESSION OF PARAPHERNALIA (use) | | | | Counts 1 | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number 893.147(1)(b) | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity P | | Drug Type P | | Amount / Unit 13PCS | | Offense # 17110103 | | Warrant / Capias Number | | | | Bond OR | | | | | | | | | |
| Charge Description | | | | Counts | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity | | Drug Type | | Amount / Unit | | Offense # | | Warrant / Capias Number | | | | Bond | | | | | | | | | |
| Charge Description | | | | Counts | | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | | Statute Violation Number | | | | Violation of ORD # | | | | | | | | | |
| Drug Activity | | Drug Type | | Amount / Unit | | Offense # | | Warrant / Capias Number | | | | Bond | | | | | | | | | |
| Location (Court, Room Number, Address) TO BE SET BY A JUDGE | | | | | | | | | | | | | | | | | | | | | |
| Court Date and Time Month Day Year Time AM PM 08 02 2017 05 00 PM | | | | | | | | | | | | | | | | | | | | | |
| I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED | | | | | | | | | | | | | | | | | | | | | |
| Signature of Defendant (or Juvenile and Parent /Custodian) | | | | Date Signed | | | | | | | | | | | | | | | | | |
| HOLD for other Agency Name: | | | | Signature of Arresting Officer A. D ORSI 24983 | | | | Name Verification (Printed by Arrestee) (PRINT) | | | | | | | | | | | | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other: | | | | Name of Arresting Officer (Print) A. D ORSI 24983 | | | | I.D. # | | | | | | | | | | | | | |
| Intake Pouch # | | | | Transporting Officer T. Davis | | | | ID # 24111 | | | | Agency PBSA | | | | | | | | | |
| Witness here if subject signed with an "X" | | | | PAGE 1 | | | | OF 1 | | | | | | | | | | | | | |

DAVIS

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|---|---|---------------------------------|---|------------------------|--|---|------------------|---------------------------|------------------------------------|
| OBTS Number | | PROBABLE CAUSE AFFIDAVIT | | 1. Arrest 2. N.T.A. | | 3. Request for Warrant 4. Request for Capias | | 1 | Juvenile |
| ADMIN | Agency ORI Number FLO 500000 | | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | | Agency Report Number 06- 17110103 | | | | |
| | Charge Type: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony | | <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor | | <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other | | Special Notes: | | |
| CHARGES | Name (Last, First, Middle) WHITE, CAROLYN, M. | | | | Alias | | Race W | Sex F | Date of Birth 12/02/1997 |
| | Charge Description POSSESSION OF HEROIN 893.13(6)(A) | | | | Charge Description POSSESSION OF PARAPHERNALIA (use) 893.147(1)(b) | | | | |
| VICTIM | Victim's Name (Last, First, Middle) STATE OF FLORIDA | | | | Race ~ | | Sex ~ | Date of Birth ~ | |
| | Local Address (Street, Apt. Number) (City) (State) (zip) | | | | Phone () () () | | Address Source | | |
| | Business Address (Name, Street) (City) (State) (zip) | | | | Phone () () () | | Occupation | | |
| | | | | | | | | | |
| The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ <input type="checkbox"/> confessed to _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. admitting to the below facts. | | | | | | | | | |
| On the 2nd day of August 20 17 at 2049HRS <input type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.) | | | | | | | | | |
| <p>On Wednesday, August 2, 2017 at approximately 2015hrs, I, D/S A. D'Orsi ID:24983, was on duty driving an unmarked vehicle traveling northbound on S. Jog Rd through the intersection of Cresthaven Blvd. Greenacres, Florida in the center lane. Detective J. D'Angelo ID: 24982 was with me at this time. It was then I observed a black Honda bearing FL tag:Y66XCF traveling in the median lane right next to me. I noticed both windows were down and observed the driver W/F Carolyn White DOB: 12/02/1997 and front passenger W/M Joshua Brand DOB: 07/11/1992 both of whom not wearing their seatbelts.</p> <p>I pulled behind the Honda and conducted a traffic stop by activating my red and blue emergency lights and siren. Immediately I observed White and Brand making furtive movements toward the center console. I could physically see them reaching in the area in what appeared to be a desperate attempt to hide something. White pulled into the southwest driveway of Trafalgar Plaza located at 6376 Forest Hill Blvd. I approached the driver's side and made contact with White while Detective D'Angelo made contact with Brand at the passenger side. Upon initial contact both were extremely nervous. Brand was sweating profusely and stated he was just released from the hospital and on Suboxone, a common opiate addition medication. White had her large purse on her lap which she was obviously digging in moments prior to the stop. Due to the fact both were making extensive furtive movements and the knowledge that Brand was on Opiate addiction medicine, both were asked to exit the vehicle for a search. I located an open red and white L & M Reds Cigarette pack just inside White's purse. I observed a clear capsule that was half full of a tan colored powder I suspected to be heroin based on my training and experience wedged between the clear cellophane wrapping of the box and the outer portion of the box. In addition, I located 3 burnt plastic straws with residue, 9 empty clear pill capsules with residue inside and several pieces of tin foil with black burnt residue inside her purse. I presented White with what I found. She ultimately admitted to being addicted to heroin and that she just picked up her habit recently. It shall be noted White is currently enrolled in Stepping Stones Rehabilitation Center for opiate addiction and clearly needs help.</p> <p>The heroin located in the clear capsule field tested positive with a Marquis test kit and negative with a Cobalt. It was weighed in the capsule on an Ohaus triple beam scale for a total of 0.1 grams TPW.</p> <p>White was placed under arrest and transported to PBSO D-16 Substation for processing.</p> <p>The 13Pcs of paraphernalia and heroin were packaged and placed into evidence at PBSO D-16 Substation.</p> <p>White was arrested for Possession of Heroin and Possession of Paraphernalia and later transported to the Palm Beach County jail without further incident.</p> | | | | | | | | | |
| ADMINISTRATIVE | STATE OF FLORIDA COUNTY OF PALM BEACH A. D'ORSI 24983 (Signature of Arresting/Investigative Officer) | | | | | | | | |
| | The foregoing instrument was sworn to or affirmed and subscribed before me this 2nd day of August 20 17 by A. D'ORSI 24983 (Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced Personally Known | | | | | | | | |
| | Notary Public, Clerk of Court, Officer (F.S.S. 117.10) 24111 | | | | | | | | |
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